

109159177

CLAIMS AS FILED - PART I

| | (Column 1) | (Column 2) |
|----------------------------------|------------|------------|
| TOTAL CLAIMS | | |
| FOI | | |
| TOTAL CHARGEABLE CLAIMS | | |
| INDEPENDENT CLAIMS | | |
| MULTIPLE DEPENDENT CLAIM PRESENT | | |

* If the difference in column 1 is less than zero, enter "0" in column 2.

SMALL ENTITY TYPE ☐

OTHER THAN SMALL ENTITY ☐

| RATE | FEE |
|-----------|---------|
| BASIC FEE | \$25.00 |
| X10 | |
| X42 | |
| +140 | |
| TOTAL | |

| RATE | FEE |
|-----------|---------|
| BASIC FEE | \$70.00 |
| X10 | |
| X42 | |
| +140 | |
| TOTAL | |

CLAIMS AS AMENDED - PART II

| AMENDMENT A | (Column 1) | | (Column 2) | | (Column 3) |
|---|----------------------------------|-------|------------------------------------|--|---------------|
| | CLAIMS REMAINING AFTER AMENDMENT | | HIGHEST NUMBER PREVIOUSLY PAID FOR | | PRESENT EXTRA |
| Total | 22 | Minus | 20 | | 2 |
| Independent | 2 | Minus | 3 | | |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/> | | | | | |

SMALL ENTITY ☐

OTHER THAN SMALL ENTITY ☐

| RATE | ADDITIONAL FEE |
|------------------|----------------|
| X\$9 | |
| X42 | |
| +140 | |
| TOTAL ADDIT. FEE | |

| RATE | ADDITIONAL FEE |
|------------------|----------------|
| X\$18 | 100 |
| X42 | |
| +280 | |
| TOTAL ADDIT. FEE | |

3/2/06

| AMENDMENT B | (Column 1) | | (Column 2) | | (Column 3) |
|---|----------------------------------|-------|------------------------------------|--|---------------|
| | CLAIMS REMAINING AFTER AMENDMENT | | HIGHEST NUMBER PREVIOUSLY PAID FOR | | PRESENT EXTRA |
| Total | 22 | Minus | 22 | | |
| Independent | 2 | Minus | 3 | | |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/> | | | | | |

| RATE | ADDITIONAL FEE |
|------------------|----------------|
| X\$9 | |
| X42 | |
| +140 | |
| TOTAL ADDIT. FEE | |

| RATE | ADDITIONAL FEE |
|------------------|----------------|
| X\$18 | |
| X42 | |
| +280 | |
| TOTAL ADDIT. FEE | |

2/28/07

| AMENDMENT C | (Column 1) | | (Column 2) | | (Column 3) |
|---|----------------------------------|-------|------------------------------------|--|---------------|
| | CLAIMS REMAINING AFTER AMENDMENT | | HIGHEST NUMBER PREVIOUSLY PAID FOR | | PRESENT EXTRA |
| Total | 14 | Minus | 22 | | |
| Independent | 2 | Minus | 3 | | |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/> | | | | | |

| RATE | ADDITIONAL FEE |
|------------------|----------------|
| X\$9 | |
| X42 | |
| +140 | |
| TOTAL ADDIT. FEE | |

| RATE | ADDITIONAL FEE |
|------------------|----------------|
| X\$18 | |
| X42 | |
| +280 | |
| TOTAL ADDIT. FEE | |

- * If the entry in column 1 is less than the entry in column 2, write "0" in column 3.
- * If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."
- * If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."
- * The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.